



X
COPY OF PAPERS
ORIGINALLY FILED

8E17

1623

Please type plus sign (+) inside this box → ☐

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTO/SB/82 (11-96)
Approved for use through 6/30/99. OMB 0651-0035
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

REVOCATION OF POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/587,662
Filing Date	June 5, 2000
First Named Inventor	Jessie L.-S. Au
Group Art Unit	
Examiner Name	
Attorney Docket Number	TNI 2-006

RECEIVED

APR 26 2002

TECH CENTER 1600/2900

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

☒ A Power of Attorney or Authorization of Agent is submitted herewith.

OR

☒ Please change the correspondence address for the above-identified application.

☒ Customer Number

OR



Place Customer
Number Code
Label Here

<input checked="" type="checkbox"/> Firm or Individual Name	Jerry K. Mueller, Jr., Reg No. 27,576, Gerald L. Smith, Reg No. 22,009, Diane E. Burke, Reg No. 45,725				
Address	Mueller and Smith, LPA				
Address	7700 Rivers Edge Drive				
City	Columbus				
Country	US	State	OH	ZIP	43235-1355
Telephone	(614) 436-0600	Fax	(614) 436-0057		

I am the:

☒ Applicant.

☐ Assignee of record of the entire interest
Certificate under 37 CFR 3.73(b) is enclosed

SIGNATURE of Applicant or Assignee of Record

Name Jessie L.-S. Au

Signature

Date

April 12, 2002

⊕ Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.